



Universal Small Business Loan Application SERVICING

HILLSDALE, JACKSON, LENAWEЕ, LIVINGSTON, MACOMB,
MONROE, OAKLAND, WASHTENAW, AND WAYNE COUNTY

CITY OF DETROIT APPLICANTS SHOULD APPLY THROUGH THE
SMALL BUSINESS DETROIT LOAN PROGRAM

OAKLAND COUNTY APPLICANTS SHOULD APPLY THROUGH THE
OAKLAND COUNTY LOAN PROGRAM

CITY OF Pontiac APPLICANTS SHOULD APPLY THROUGH THE
SMALL BUSINESS Pontiac Loan Program

WASHTENAW COUNTY APPLICANTS SHOULD APPLY THROUGH THE
OAKLAND COUNTY LOAN PROGRAM

33109 SCHOOLCRAFT
LIVONIA, MI 48150
WEBSITE: WWW.MICEED.ORG

LOAN APPLICATION GUIDELINES

Thank you for your interest in the **CEED Lending Program**. In this package, you will receive the loan application form and personal financial statement. A business plan is needed for businesses with less than three (3) years of operations and financials. Businesses with three (3) years of operations or more need a summary of their operations and an expansion plan. The following will briefly explain the loan application procedures:

Loan Process

1. Applicant will complete the loan application. Assistance is available through CEED Lending and other local business development organizations. A list of these resources is available at the end of this document. When the application is complete, the applicant will submit the loan application, supporting documentation, along with a **\$75 non-refundable application fee made payable to Great Lakes Women's Business Council**. The original application will be retained for our records.
2. CEED Lending offers loan orientations for those who would like further insight on the application and approval process. For a listing of these dates and times, you may visit the website at www.miceed.org → **Small Business Loan** → **CEED Lending** or contact Loan Officer at (734) 677-1400.
3. The Loan Officer will review the application, verify references and collateral, and run a credit check and schedule a site visit prior to presenting the completed application to the Loan Review Committee.
4. The Loan Officer will notify the applicant of the Loan Review Committee's decision. A CEED Lending representative will schedule a loan closing for disbursement of funds for those loans approved.

Loan Terms

1. Loan amounts are \$5,000 to \$50,000.
2. Loans must be on a secured basis, with guarantees of collateral and/or possibly a co-signer.
3. Loan recipients may be allowed up to five years (60 months) to repay loans.
4. Application fee is **\$75 (non-refundable)**
5. Interest rates are set at four percent (4%) above prime, with a minimum rate of eight percent (8%).
6. Repayment of principal and interest will be on a monthly basis, with payment due on the first of each month. Payments received after the 15th of the month will owe a late fee equal to five percent (5%) of the payment.
7. A CEED Lending loan services representative will handle the loan closing and payment collections. Any legal fees incurred during the collection or default of loans will be added to the loan balance and will be paid by the borrower.

Loan Requirements

Loan recipients are required to submit copies of annual federal income tax filings and personal financial statements to CEED Lending, each year the account is open.

Business Development Resources

Detroit SCORE

<http://detroit.SCORE.org>

(313) 226.7947

- Volunteer services helps in aiding entrepreneurs

Small Business Administration

(313) 226.6075

www.sba.gov/localresources/district/mi/

- Advice in managing and planning

- Various services/tools for small businesses

Small Business & Development Center (SBDC)

MI-SBTDC Detroit Business Center

163 Madison Street, Detroit, MI 48226, USA

(313) 967.9295

www.sbdcmichigan.org

- Free counseling, training, research and advocacy for new ventures

Wayne County Community College – Entrepreneurial Institute & Resource Center

(313) 943.4048

www.wcccd.edu/

- Helps with copyrights and logos

- Free business planning courses

Wayne State Legal Business Clinic

(313) 577.9429

http://law.wayne.edu/pdf/clinic_description.pdf

- Legal expertise, lease & partnership agreements

- What type of business entity you ought to be

Oakland County Business Center – MI-SBTDC

Online Request for Assistance

(248)858.0783

Ann Arbor Area SCORE (Service Corp of Retired Executives)

<http://annarborscore.com/>

(734) 332-4477

WCC Small Business & Development Center – MI-SBDC

www.misbtdc.org

(734) 487-0355

CHECKLIST Loan Application Guidelines

Required Documentation

Please include the following information with your loan application package for a NEW business where applicable:

- New Business (Less than three (3) years of operation).**
 1. Completed Loan Application
 2. Nonrefundable application fee of \$75.00
 3. Business Plan
 4. Two letters of denial for loan requests over \$20,000
 5. Last two years of personal tax returns of applicant, complete with all schedules (signed)
 6. Interim business financial statements-less than 90 days old
 7. Two years of financial projections
 8. Personal resume
 9. Certificate of Insurance – or quote
 10. Lease Agreement – does not need to be signed
 11. Detailed use of loan proceeds
 12. DBA, Articles of Incorporation, and/or partnership agreement, LLC, Bylaws, operating agreement
 13. Two signed letters of reference
 14. Description of present or pending lawsuit(s), or bankruptcy
 15. Franchise agreement (if applicable)
 16. Additional information that will enhance loan proposal
 17. Personal Financial Statement (last page of application)

- Existing Business**
 1. Completed Loan Application
 2. Nonrefundable application fee of \$75.00
 3. Business expansion plan
 4. Two letters of denial for loan requests over \$20,000
 5. Last two years of personal tax returns of applicant, complete with all schedules (signed)
 6. Last two years of business tax returns of applicant, complete with all schedules (signed)
 7. Interim business financial statements – less than 90 days old
 8. Two years of financial projections
 9. Personal resume
 10. Certificate of Insurance
 11. Lease Agreement
 12. Detailed use of loan proceeds
 13. DBA, Articles of Incorporation, and/or partnership agreement, LLC, Bylaws, operating agreement
 14. Two signed letters of reference
 15. Description of present or pending lawsuit(s), or bankruptcy
 16. Franchise agreement (if applicable)
 17. Additional information that will enhance loan proposal
 18. Personal Financial Statement (last page of application)

The average time required to process a complete application is approximately 6 to 8 weeks. When you have completed the application, **please mail: CEED Lending, Attn: CEED Loan Department, 33109 Schoolcraft Road, Livonia, MI 48150.**

If you have any additional questions, please contact our Loan Officer at (734) 677-1400

General Information

(OFFICE USE ONLY: DATE APPLICATION FEE PAID _____)

Date of Application ____ - ____ - ____

Please type or print clearly

Amount requested \$ _____

Applicant's Name _____ Email _____

Home Address _____

City/State/Zip _____ Date of Birth ____ / ____ / ____

Home Phone(____) _____ Social Security Number ____ - ____ - ____

Cell Phone (____) _____ Drivers License Number _____

Business Name _____

Business Address _____

City/State/Zip _____

Phone (____) _____ Fax (____) _____ Employer ID number _____

Email _____ Website _____

Landlord Name _____ Phone(____) _____

Address _____

City/State/Zip _____

Owners and Key Personnel

Name _____ Percent Ownership or Title _____

Name _____ Percent Ownership or Title _____

Name _____ Percent Ownership or Title _____

1. Description of Business:

2. **Business is:** New(under 1 year) Existing. If existing, date of establishment _____

Type of organization:

Sole proprietorship Partnership Corporation Other _____

Number of employees:

Current: Full Time _____ Part time _____

If loan is approved: Full time _____ Part time _____

3. Has any principal owner filed bankruptcy or been sued in the last seven years?

Yes No If yes, please explain on a separate sheet.

4. Projected use of loan funds - Detailed use of funds required in business plan.

Working Capital \$ _____
Machinery \$ _____
Equipment \$ _____
Furnishings \$ _____
Inventory \$ _____
Other \$ _____ for _____
TOTAL \$ _____

5. Banking affiliation

Personal Bank _____
Address _____
City/State/ Zip Code _____
Telephone _____

Business Bank _____
Address _____
City/State/ Zip Code _____
Telephone _____

6. Where have you applied for business credit or loan funds? (If loan request is over \$20,000, attach copies of two denial letters.) _____

7. If loan request is \$20,000 or under; were your requests denied? _____

8. Give present value of all items used to collateralize this loan:

a. Land and building \$ _____ Address: _____
b. Accounts receivable \$ _____
c. Machinery and equipment \$ _____
d. Furniture and fixtures \$ _____
e. Other _____ \$ _____
Total Collateral \$ _____

9. Provide a list of all personal items worth over \$500 (attach a second sheet if needed):

Item	Value
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

10. Do you have a co-signer for this loan? Yes No. If yes:

Print name of co-signer: _____

- Co-signer must:
- 1.sign credit release
 - 2.complete personal financial statement
 - 3.provide current income tax returns, complete with all schedules

11. Have you used a consultant to help you prepare this application and/or business plan?

Yes No

12. If yes, was this service **Free** or **Paid.** If paid, please provide name and address of:

Preparer: _____

13. Are you sixty (60) or more days delinquent on: child support, IRS obligation or student loan?

Yes No

14. Are you presently under indictment, on parole, or on probation? **Yes** **No**

15. Have you ever been charged with or arrested for any criminal offense (other than minor vehicle violations)? Yes No

(If you answered yes to either questions 13, 14 or 15, then please provide a written explanation.)

I certify that all information in this application is true and correct.

Signature of Applicant

Date

Personal Information

Please print or type clearly

Applicant's Name _____ Cell Phone (____) _____

Current Address From (m/d/yr) _____ to Present

Street Address _____

City/State/Zip _____ Home Phone (____) _____

If Rental, Landlord Name: _____ Phone (____) _____

Street Address _____

City/State/Zip _____

Previous Address From (m/d/yr) _____ to (m/d/yr) _____

Street Address _____

City/State/Zip _____ Home Phone (____) _____

If Rental, Landlord Name: _____ Phone (____) _____

Street Address _____

City/State/Zip _____

Current Employment: From (m/d/yr) _____ to Present

Employer _____ Title/position _____

Street Address _____

City/State/Zip _____ Phone (____) _____

Supervisor: _____ Email _____

Previous Employment: From (m/d/yr) _____ to (m/d/yr) _____

Employer _____ Title/position _____

Street Address _____

City/State/Zip _____ Phone (____) _____

Supervisor: _____ Email _____

Closest Relative not living with you:

Name: _____ Relationship _____

Street Address _____

City/State/Zip _____ Cell/Home Phone (____) _____

Personal Financial Information

Name _____

Address _____ City _____ State _____ Zip Code _____

Marital Status _____ Number in Household _____

Average Monthly Income	Per Month (Net)
Your Wages (net)	_____
Spouse Wages (net)	_____
Other Income	_____
Total Monthly Income	=====

Average Monthly Living Expenses

<p>HOUSING</p> <p>Rent/Mtg. _____</p> <p>Heat _____</p> <p>Electricity _____</p> <p>Water _____</p> <p>Phone _____</p> <p>Taxes _____</p> <p>Repairs _____</p> <p>FOOD</p> <p>Groceries _____</p> <p>Meals Out _____</p> <p>TRANSPORTATION</p> <p>Car Payment _____</p> <p>Gas/Fare _____</p> <p>Maintenance _____</p> <p>Parking _____</p> <p>CHILD SUPPORT _____</p>	<p>INSURANCE</p> <p>Car _____</p> <p>Home _____</p> <p>Life/Health _____</p> <p>Self Emp. Tax _____</p> <p>PERSONAL EXPENSES</p> <p>Clothing _____</p> <p>Medical/Dental _____</p> <p>Education _____</p> <p>Professional Fees _____</p> <p>Gifts _____</p> <p>Donations _____</p> <p>Entertainment _____</p> <p>Child Care _____</p> <p>Vacations _____</p> <p>CC/Debt Payments _____ *</p> <p>Other Debt Payments _____ *</p>
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*Details required on Sec 2 of Personal Financial Stmt.

Total Monthly Living Expenses	_____
Income minus Living Expenses	=====

I hereby certify that the above is a true and accurate statement of my personal expenses:

Signature _____ Date _____

CREDIT RELEASE FORM

For
Great Lakes Women's Business Council

I/We certify that all the information contained in the attached application is true and includes a complete representation of all material facts as of this date. In addition, I/we give permission to the Great Lakes Women's Business Council, formally known as Center for Empowerment & Economic Development, Executive Director, Loan Officer, and/or staff to request and receive information required to verify employment, mortgages, deed of trust, savings accounts, credit accounts, and all other information necessary to complete the application for this loan, including but not limited to, maintenance of account.

Applicant Signature

Co-Applicant Signature

Applicant's Name (type or print clearly)

Co-Applicant's Name (type or print clearly)

Social Security Number

Social Security Number

Date of Birth

Date of Birth

Street Address

Street Address

City, State, and Zip Code

City, State, and Zip Code

Telephone Number

Telephone Number

Driver License Number

Driver License Number



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name _____ Business Phone _____

Residence Address _____ Residence Phone _____

City, State, & Zip Code _____

Business Name of Applicant _____

ASSETS		(Omit Cents)	LIABILITIES		(Omit Cents)
Cash on hand & in Banks	\$	_____	Accounts Payable.....	\$	_____
Savings Accounts.....	\$	_____	Notes Payable to Banks and Others	\$	_____
IRA or Other Retirement Account	\$	_____	(Describe in Section 2)		
Accounts & Notes Receivable.....	\$	_____	Installment Account (Auto)	\$	_____
Life Insurance-Cash Surrender Value Only.....	\$	_____	Mo. Payments \$ _____		
(Complete Section 8)			Installment Account (Other)	\$	_____
Stocks and Bonds	\$	_____	Mo. Payments \$ _____		
(Describe in Section 3)			Loan on Life Insurance	\$	_____
Real Estate.....	\$	_____	Mortgages on Real Estate	\$	_____
(Describe in Section 4)			(Describe in Section 4)		
Automobile-Present Value.....	\$	_____	Unpaid Taxes	\$	_____
Other Personal Property	\$	_____	(Describe in Section 6)		
(Describe in Section 5)			Other Liabilities.....	\$	_____
Other Assets	\$	_____	(Describe in Section 7)		
(Describe in Section 5)			Total Liabilities.....	\$	_____
Total	\$	_____	Net Worth	\$	_____
			Total	\$	_____

Section 1. Source of Income

Salary.....	\$	_____
Net Investment Income.....	\$	_____
Real Estate Income	\$	_____
Other Income (Describe below)*	\$	_____

Contingent Liabilities

As Endorser or Co-Maker	\$	_____
Legal Claims & Judgments.....	\$	_____
Provision for Federal Income Tax.....	\$	_____
Other Special Debt.....	\$	_____

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).					
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned.	(List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)		
	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature: _____ Date: _____ Social Security Number: _____

Signature: _____ Date: _____ Social Security Number: _____

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Officer, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.

Instructions to Assist in Completing the Personal Financial Statement (SBA Form 413) for the CEED MicroLoan Program

Please do not make adjustments to your figures pursuant to U.S. Department of Transportation (U.S. DOT) regulations 49 CFR Part 26. The agency that you apply to will use the information provided on your completed Personal Financial Statement to determine your *Personal Net Worth According to 49 CFR Part 26*. An individual's *Personal Net Worth According to 49 CFR Part 26* includes only his or her own share of assets held jointly or as community property with the individual's spouse and excludes the following:

- Individual's ownership interest in the applicant firm;
- Individual's equity in his or her primary residence;
- Tax and interest penalties that would accrue if retirement savings or investments (e.g., pension plans, Individual Retirement Accounts, 401(k) accounts, etc.) were distributed at the present time.

If your *Personal Net Worth According to 49 CFR Part 26* exceeds the \$750,000 cap and you, individually, or you and other individuals are the majority owners of an applicant firm, the firm is not eligible for DBE certification. If the *Personal Net Worth According to 49 CFR Part 26* of the majority owner(s) exceeds the \$750,000 cap at any time after your firm is certified, the firm is no longer eligible for certification. Should that occur, it is your responsibility to contact your certifying agency in writing to advise the firm no longer qualifies.

General Instructions

- You must fill out all line items on the Personal Financial Statement (SBA Form 413) to the best of your ability.
- On the form, above the *Personal Financial Statement* heading, indicate if financial information is for a "married couple" or "single individual."
- On a separate sheet, identify all property that is not held jointly or as community property, and include values and ownership.
- If necessary, use additional sheet(s) of paper to report all information and details.
- If you have any questions about completing this form, please contact one of the certifying agencies on the Roster of Certifying Agencies.

Specific Instructions

DATE AND CONTACT INFORMATION

Be sure to include the date in the upper right corner of the first page and your contact information.

ASSETS

All assets must be reported at their current fair market values as of the date of your statement. ***Assessor's assessed value for real estate, for example, is not acceptable.*** Assets held in a trust generally should be included.

Cash on hand & in Banks: Enter the total amount of cash on-hand and in bank accounts other than savings.

Savings Accounts: Enter the total amount in all savings accounts.

IRA or other Retirement Account: Enter the total present value of all IRAs and other retirement accounts, including any deferred compensation and pension plans.

Accounts & Notes Receivable: Enter the total value of all monies owed to you personally, if any. This should include shareholder loans to the applicant firm, if any.

Life Insurance-Cash Surrender Value Only: Enter the value of any life insurance policies. This amount should be cash surrender value only, not the amount a beneficiary would receive upon your death, also known as face value. A complete description is required in Section 8.

Stocks and Bonds: Enter the current market value of your stocks and bonds. A complete listing and description is required in Section 3.

Real Estate: Enter the current fair market value of all real estate owned. A complete listing and description of all real estate owned is required in Section 4. The amount must correspond with the total "Present Market Value" amounts listed in Section 4.

Automobile-Present Value: Enter the current fair market value of all automobiles owned.

Other Personal Property: Enter the current fair market value of all other personal property owned, but not included in the previous entries. A complete description of these assets is required in Section 5.

Other Assets: Enter the current fair market value of all other assets owned, but not included in the previous entries. A complete description of these assets is required in Section 5.

LIABILITIES

Accounts Payable: Enter the total value of all unpaid accounts payable that is your responsibility.

Notes Payable to Bank and Others: Enter the total amount due on all notes payable to banks and others. This should not, however, include any mortgage balances. A complete description of all notes payable to banks and others is required in Section 2.

Installment Account (Auto): Enter amount of the present balance of the debt that you owe for auto installment account. Please be sure to indicate the total monthly payment in the space provided.

Installment Account (Other): Enter amount of the present balance of the debt that you owe for other installment account. Please be sure to indicate the total monthly payment in the space provided. For example, include the balances of all credit card debts in this line.

Loans on Life Insurance: Enter the total value of all loans due on life insurance policies.

Mortgages on Real Estate: Enter the total balance on all mortgages payable on real estate. A complete breakdown of all mortgages on real estate is required in Section 4. The amount must correspond with the total of the mortgage balances amounts listed in Section 4.

Unpaid Taxes: Enter the total amount of all taxes that are currently due, but are unpaid. Contingent tax liabilities or anticipated taxes for current year should not be included. A complete description is required in Section 6.

Other Liabilities: Enter the total value due on all other liabilities not classified in the previous entries. A complete description is required in Section 7.

Net Worth: To compute Net Worth, add all liabilities and put that figure in the Total Liabilities line. Then subtract Total Liabilities from Total Assets to get your Net Worth. To check your figures, add Total Liabilities and Net Worth and the sum must equal Total Assets. If your figures do not match, your form will be returned to you to correct and complete again.

SECTION 1. SOURCE OF INCOME

Salary: Enter the amount of your total annual salary. This includes any salary from the applicant firm and if applicable, any salary from outside employment.

Net Investment Income: Enter the total amount of all investment income (i.e. dividends, interest, etc.).

Real Estate Income: Enter the total amount of all real estate income received from the sale, rental, lease, etc. of real estate held.

Other Income: Enter the total amount of all other income received (i.e. alimony, social security, pension, etc.). Please be sure to describe the source of the other income in the space provided below in this section.

CONTINGENT LIABILITIES

Contingent liabilities are liabilities that belong to you only if an event(s) should occur. For example, if you have co-signed on a relative's loan, but you are not responsible for the debt until your relative defaults, that is a contingent liability. Contingent liabilities do not count toward your net worth until they become actual liabilities.

As Endorser or Co-Maker: Enter the total potential liabilities due as a result of being a co-signer for a loan or other commitments.

Legal Claims and Judgments: Enter the potential liabilities due as a result of legal claims from judgments, lawsuits, etc.

Provisions for Federal Income Tax: Enter the total amount of all federal taxes for which you are potentially liable due to an anticipated gain on the pending sale of an asset or other circumstances, such as pending disputes or litigation which could possibly result in a personal tax liability.

Other Special Debt: Enter the total amount due on all remaining potential debts not accounted for.

SECTION 2. NOTES PAYABLE TO BANKS AND OTHERS

Enter the name and address of note holder(s), original balance, current balance, payment amount, frequency, and how secured for each note payable as entered in the "Liabilities" column. Do not include loans for your business or mortgages for your properties.

SECTION 3. STOCKS AND BONDS

Enter the number of shares, names of securities, cost, fair market value, and the date of fair market value for all shares of stock and bonds held. You may attach recent copies of your stock account listings. Do not include stock in your business.

SECTION 4. REAL ESTATE OWNED

Starting with your primary residence (be sure to identify it as your primary residence), enter the type of property, address, date of purchase, original cost, present fair market value, name and address of mortgage holder, mortgage account number, mortgage balance, amount of payment, and status of mortgage for all real estate held. Please ensure that this section contains all real estate owned, including rental properties, vacation properties, commercial properties, etc.

Total "Present Market Value" amounts should correspond with the "Real Estate" amount listed in the "Assets" column. Additionally, total "Mortgage Balance" amounts should correspond with the "Mortgages on Real Estate" amount listed in the "Liabilities" column. Attach additional sheets if needed.

SECTION 5. OTHER PERSONAL PROPERTY AND OTHER ASSETS

Itemize and describe in detail other personal property and other assets owned as listed in the "Assets" column. For other personal property, include boats, trailers, jewelry, furniture, household goods, collectibles, clothing, etc. For other assets, include equity interest in other businesses, trusts, investments, etc.

SECTION 6. UNPAID TAXES

Describe in detail as to the type, to whom payable, when due, amount, and to what property, if any, the tax lien attaches. Please refer to the unpaid taxes listed in the "Liabilities" column. If none, state "NONE." This section should not include the contingent tax liabilities or anticipated taxes owed for the current year. For any unusually large amounts, you must include documentation, such as tax liens, to support the amounts.

SECTION 7. OTHER LIABILITIES

Describe in detail any other liabilities as referenced by the value listed in the "Liabilities" column. If none, state "NONE." For any unusually large amounts, you must include documentation, such as bills, to support the amounts.

SECTION 8. LIFE INSURANCE HELD

Describe all life insurance policies held. Please be sure to include the face amount of the policies, name of insurance company and beneficiaries and cash surrender values of the policies.

EXECUTION OF STATEMENT

Be sure to sign, date, and include your social security number at the end of the statement.